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Spanish version of the Coping Strategies Inventory

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Introduction. The aim of the present study was to adapt the Coping Strategies Inventory (CSI) to the Spanish setting. This need is justified on the one hand by the shortage and limitations of the instruments available in our language and, on the other, by the excellent potentialities that the CSI offers.

Method. It was translated and applied to a sample of 337 adults, with diverse demographic characteristics, recruited from different teaching activities by the authors in the province of Seville (Spain).

Results. The results showed excellent psychometric properties surpassing those of the original study: eight factors accounted for 61% of variance with only 40 items (as opposed to the 72 that accounted for 47% in the original study) and obtained Alpha coefficients between 0.63 and 0.89. The convergent validity was verified using intercorrelations between scales, correlations with personality dispositions (NEO-FFI) and with the coping efficacy.

Discussion. The CSI was a valid and reliable measure of coping strategies used in many stressful situations.

Key words:

Coping. Stress. Assessment. Coping Strategies Inventory. Personality.

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Adaptación española del Inventario de Estrategias de Afrontamiento

Introducción. En el presente trabajo acometimos la adaptación del Inventario de Estrategias de Afrontamiento (CSI) al ámbito español. Esta necesidad se justifica, por una parte, por la escasez y las limitaciones de los

instrumentos disponibles en nuestro idioma, y por otra, por las excelentes potencialidades que ofrece el CSI.

Método. Fue traducido y aplicado a una muestra de 337 personas adultas de características sociodemográficas diversas, recogida de forma incidental en actividades formativas en la provincia de Sevilla.

Resultados. Los resultados mostraron unas excelentes propiedades psicométricas superando incluso las del estudio original: ocho factores explicaron un 61% de la varianza con sólo 40 ítems (frente a los 72 que explicaban un 47% en el instrumento original) y obtuvieron coeficientes de consistencia interna entre 0,63 y 0,89. La validez convergente se comprobó utilizando las intercorrelaciones entre escalas y las correlaciones con disposiciones de personalidad (NEO-FFI) y eficacia percibida del afrontamiento.

Conclusiones. El CSI se comportó de forma válida y fiable en la evaluación de la utilización de estrategias de afrontamiento en una amplia variedad de situaciones.

Palabras clave:

Afrontamiento. Estrés. Evaluación. Inventario de Estrategias de Afrontamiento. Personalidad.

INTRODUCTION

Coping against adversity is currently considered a very relevant aspect of personal functioning¹. Even though the subject is already a classical one (consider the psychoanalytic concept of defense mechanism), the great appearance of coping as an object of study occurred with the «cognitive revolution», specifically after the work of Lazarus². In relationship with the dominant paradigm at that time, he established his relational theory of stress as a personal process of appraisal and coping of situations. After several decades of investigation, the model has demonstrated its viability to understand how persons manage stressor in their life. Currently, although Lazarus maintains the essential aspects of the theory, on the one hand, he has converted it into a theory of emotions, including non-stressor appraisals of the situations and on the other, he has made an epistemological and methodological shift towards constructivist and qualitative positions, respectively³.

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Focusing on the coping process, they have elaborated two concepts on how people manage stressors: coping styles and coping strategies. According to Pelechano, one of the authors who most systematically has investigated coping process in our country, they are not opposite but rather complementary concepts, the first representing stable and consistent forms of coping with stress while the second refers to more specific actions⁴. In fact, there are theoretical frameworks that combine the dispositional perspective that represent coping styles with contextual perspective that represent coping strategies⁵. In any event, the notion of strategy has advantages in regards to that of style, such as its capacity to be modified and greater predictive capacity, that have made it more attractive from the intervention perspective. It is not surprising that it has led to greater interest in investigation. Whether strategies or styles, it is absurd to dissociate coping from the person's personality³ as demonstrated by the research that links both constructs⁶⁻¹⁰.

Folkman and Moskowitz¹¹ suggest two historical stages in the assessment of coping strategies. At first, quantitative assessment appeared through verification scales, qualification scale, questionnaires and psychometric inventories. The subject described the stressful situation and graded elements regarding coping actions according to a dichotomic or Likert type scale. Practically all of them came from the Way of Coping Scale¹², the COPE¹³, Coping Strategies Inventory¹⁴, Coping Strategies Indicator¹⁵, and Stressor Situation Coping Inventory¹⁶ standing out. As the authors state, the quantitative assessment of coping strategies has disadvantages such as having to remember the stressful situation or talk about it immediately, excessive length of the instruments, confusing coping with the results or the necessary restriction of the number of coping strategies contemplated. In a second more recent time and in order to rectify these deficiencies, qualitative procedures such as narrative analysis, which make it possible, among other things, to go deeper into the individual meaning of the situation, clarify which stressor is being coped with or discover new coping ways not foreseen in the questionnaires have come into practice.

From our perspective, an instrument such as the Coping Strategies Inventory (CSI)¹⁴, when adequately applied, makes it possible to resolve most of the previously mentioned difficulties. As detailed in the Material section, it collects two types of information. The first is qualitative, where the person describes the stressful situation. The second is quantitative, where response is given to the frequency that certain coping strategies are used according to the Likert scale and the efficacy grade perceived in the coping. Thus, both narrations and scores used in interindividual and intraindividual designs can be used in the CSI in a reasonably short time. A situation can be remembered, and analyzed in the present or even contemplated in the future (see proactive coping concept in Aspinwall and Taylor¹⁷). A situation can be given in detail or all the context of stressful situations assessed. Both new meanings of stress and new coping strate-

gies can be verified and/or discovered and the use of strategies and their results can be discriminated perfectly. These are some of the advantages.

There are few developed or adapted instruments in our country to evaluate coping strategies. We can mention the adaptation of the Ways of Coping Scale¹⁸, the Current Coping Strategies Questionnaire¹⁹, the Questionnaire of Ways of Coping with Stressful Events²⁰ and the COPE adaptation²¹. Even though these mean an extraordinary advance in the assessment of coping strategies in our country, they have some limitations that make it necessary to continue working on the design, adaptation and improvement of coping assessment instruments. These are both methodological and practical functionality limitations. These limitations are, among others, that they were developed from specific samples¹⁹, they had been adapted exclusively or almost exclusively with university students^{18,20,21}, they were adapted only from an dispositional version²¹, they used a dichotomic answer modality¹⁸, they had an excessively unequal number of items^{18,20,21}, and they have some negative loading items^{20,21}.

The CSI was partially developed, as almost all the coping strategy assessment instruments, from the Ways of Coping Scale¹², although more than half of the items were generated by the authors using structured interviews, open interviews and brainstorming sessions. A hierarchical factor analysis was done on the initial pool of 109 items. This gave rise to the structure that is commented on in the Material section. The final instrument was made up of 72 items, 9 for each one of the 8 primary scales, and was validated from a sample of 398 university subjects. The first order structure reached an explanation of 47% of the total variance and the Cronbach's Alpha reliability coefficients ranged from 0.72 to 0.94. The CSI has been used in research of coping in individuals with a transplant²², in HIV patient²³, in post-traumatic stress²⁴, in those with amputations²⁵, in self-mutilated subjects²⁶, etc. However, we are not aware of any validation studies on its psychometric properties or on its adaptation to other languages.

Considering that stated in the paragraphs above, this work has aimed to adapt the CSI to our setting, verifying its psychometric properties with the greatest amount and variety possible of persons and stressful situations. Specifically, we have established three hypotheses:

- On the structure of the instrument: *a)* confirm a first order structure with eight assimilable factors to those obtained in the original study and explaining a percentage of similar variance; *b)* confirm a second order structure with four factors that combine the criteria «focused on the problem vs. focused on the emotion» and «adaptive vs. disadaptive», and *c)* confirm a third order structure with two factors according to the «adaptive vs. disadaptive» criteria.

- On the internal consistency of the instrument: some adequate levels of internal consistency, similar to at least those of the original study, will be obtained.
- On the convergent validity of the instrument: *a)* an elevated number of correlations between first order strategies, in a percentage similar to that of the original study, will be produced; *b)* associations that are expected according to the literature between the use of coping strategies and basic personality dispositions would be produced, and *c)* associations to be expected according to the literature between the use of coping strategies and its perceived efficacy would be produced.

METHOD

Subjects and procedure

A total of 337 persons from Seville and the province, 226 men and 111 women whose ages ranged from 17 to 55 years (average of 29 ± 9 years) participated. All the samples were gathered incidentally during different training activities of the authors. Thus, 28% of the sample were presenting to the examinations for a position in the basic levels of the State Security Forces, 27% were university students in Psychology and Psychopedagogy studies, 28% unemployed who were taking some Vocational Training Course, 10% from the general population and finally, 10% local police. A total of 72% of the persons were single, 26% married and 2% a different civil status. A total of 55% had a secondary education/vocational training, 21% high school and the remaining 25% were university students.

The instruments were applied collectively and were self-administered during the educational activity of some of the authors according to the instructions given by the psychometric procedures of personality assessment (confidentiality of the information, non-existence of correct answers, spontaneity of answer, etc.). Special emphasis was made on the specific instructions of the CSI, that are described in the following section.

All the data were processed with the SPSS 12 program. Besides the usual descriptive statistics in this type of studies, the factor analysis was used to verify the validity of the CSI construct (principal components with varimax rotation); for the internal consistency, Cronbach's alpha coefficient, and for convergent validity, Pearson's correlation coefficient.

Material

We used two evaluation instruments: NEO-FFI personality inventory and, obviously, the Coping Strategy Inventory (CSI).

The NEO-FFI Personality Inventory is the reduced version of the NEO-PI-R, one of the instruments used most in the assessment of the «Big Five», basic elements of the personal structure obtained from the lexic hypothesis in the personality study. We have used the Spanish adaptation done by the TEA publishing firm on 2,000 persons, that has shown adequate reliability and validity²⁷: Cronbach's alpha coefficients between 0.82-0.90; pentafactorial structure identical to the original inventory. It has 60 items that are scored according to a 5 point Likert type scale. Briefly, the five scores offered by the inventory are Neuroticism (emotional instability level), Extraversion (energy level and sociability), Openness (level of intellectual curiosity and esthetic sensitivity, Agreeableness (level of interpersonal tendencies of approach or rejection of others) and Conscientiousness (self-discipline and self-determination level).

The CSI¹⁴ has a hierarchical structure made up of eight primary strategies, four secondary and two tertiary ones. The person begins by describing the stressful situation in detail. As we advance in the introduction, severe qualitative procedures of analysis can be applied to the description. For example, some of us have used the textual analysis to obtain categories of meanings on work stress and its management in a sample of unemployed subjects who were taking a Vocational Training Course²⁸ or to go deeper into the stress and the management of those taking the exam for the Security Forces²⁹. After, the subject answers 72 items, according to a five point Likert type scale, regarding the frequency they had in the situation described in each item. At the end of the scale, an additional item is answered on the coping perceived efficacy («To what degree did you adequately manage the situation?: not at all- a little-a lot-very much, completely»).

The eight primary scales are, briefly: Problem solving: cognitive and behavioral strategies aimed at eliminating stress by modifying the situation that produces it; Cognitive restructuring: cognitive strategies that modify the meaning of the stressful situation; Social support: strategies referring to emotional support seeking; Express emotions: strategies aimed at releasing emotions that occur during the stress process; Problem avoidance: strategies that include rejection and avoidance of thoughts or acts related with stressful events; wishful thinking: cognitive strategies that reflect the desire that the reality was not stressful; Social withdrawal: strategies of withdrawal from friends, family, colleagues and significant persons associated with emotional reaction in the stressful process; Self-criticism: strategies based on self-blame and self-criticism due to the occurrence of stressful situation or inadequate management.

The secondary scales come from the empiric grouping of the primary ones: Problem-Focused engagement: this includes the Problem solving and Cognitive restructuring subscales, indicating an adaptive coping focused on the problem. This either modifies the situation or its meaning. Also inclu-

ded are Emotion-Focused engagement: this includes the Social Support and Express emotions subscales, that reflect adaptive coping focused on the management of the emotions that arise in the stressful process; Problem-Focused disengagement: it includes the Problem Avoidance and Wishful thinking subscales, indicating a disadaptive coping focused on the problem that either avoids the stressful situations or has fantasies on the present, past or future alternative realities; Problem-Focused disengagement that includes the Social withdrawal and self-criticism subscales, reflecting disadaptive coping focused on emotions, but based on isolation, self-criticism and self-blame.

Tertiary scales arise from the empiric grouping of the secondary ones: Engagement this includes Problem solving, Cognitive restructuring, Social Support and Express emotions subscales, indicating active and adaptive efforts to compensate the stressful situation; Disengagement: including Problem avoidance, Wishful thinking, Social Withdrawal and Self-criticism subscales, suggesting passive and disadaptive coping.

RESULTS

Structure and internal consistency of the CSI

We performed a first factor analysis on 72 items of CSI that obtained 48% of explanation of the variance with eight factors. To debug the items, we eliminated those that had communalities under 0.30 (items 1, 2, 3, 5, 9, 14, 28, 37, 45, 54 and 61).

We then re-applied the factor analysis to the 61 remaining items, once again obtaining an eight factor solution. In this case, it explained 53% of the variance. At that time, we found the Cronbach's alpha reliability coefficients of the factors obtained, verifying that the elimination of 6 items would significantly increase these coefficients. Specifically, the elimination of items 6 and 49 would increase reliability of its factor by 0.11; those of items 40 and 60 by 0.10 and finally that of item 11 in 0.05.

We then re-applied the factor analysis to the 55 resulting items, obtaining an explanation of 59% of the variance. We verified that the factor with the least number of items had 5 and decided to limit all the factors to this number of items (communalities greater than 0.45). In this way, we achieved a low number and greater representativity of the items and greater homogeneity in the factors.

Thus, we factorized the 40 resulting items, obtaining the final solution of eight factors that achieved an explanation of 61% of the variance. Items 8 («I tried to keep my feelings to myself») and 56 («I kept my thoughts and feelings to myself») originally loaded in the Express emotions factor, and to a lesser degree, in that of Social withdrawal. Consi-

dering that maintaining them in this way would decrease reliability of the first factor 0.25 and of the second one 0.12, which also had a negative sign (which hinders correction) and that theoretically was included in Social withdrawal, we decided to assign them to the latter factor. Having applied this change, all the items loaded in the factors expected according to the Tobin et al. work¹⁴ and did so with significantly greater saturations in our study. We used the same names as the authors of the questionnaire¹⁴:

- Factor 1. Problem solving: includes items 65, 57, 33, 41 and 17 of the original work, with factor loadings from 0.82 to 0.67.
- Factor 2. Self-criticism: includes items 23, 47, 31, 55 and 63 of the original work, with factor loadings from 0.87 to 0.79.
- Factor 3. Express emotions: includes items 27, 19, 59, 43 and 51 of the original work, with factor loadings from 0.74 to 0.46.
- Factor 4. Wishful thinking: includes items 38, 30, 22, 62 and 46 of the original work, with factor loadings from 0.79 to 0.59.
- Factor 5. Social support: includes items 12, 36, 44, 60 and 52 of the original work, with factor loadings from 0.74 to 0.65.
- Factor 6. Cognitive restructuring: includes items 66, 58, 42, 34 and 10 of the original work, with factor loadings from 0.72 to 0.55.
- Factor 7. Problem avoidance: includes items 29, 21, 53, 13 and 69 of the original work, with factor loadings from 0.67 to 0.44.
- Factor 8. Social withdrawal: includes items 48, 32, 72, 56 and 8 of the original work, with factor loadings from 0.74 to 0.39.

A comparative summary of the results regarding the original study is presented in table 1. Two aspects especially stand out. In the first place, there is a significantly greater total percentage of explained variance (+13%) with 45% fewer items. In the second place, there is a more homogeneous distribution of the percentages of variance explained by the factors (5% to 9% vs. 3% to 12%).

In this same table, we can also observe Cronbach's alpha reliability coefficients. All are very elevated except those of Problem Avoidance and Social withdrawal factors, that are adequate. They are distributed similarly to those of the original study, although they almost always obtained somewhat lower scores.

Once the first order factor structure was obtained, we tried to do the same with that of the second one. Thus, we conducted a new factor analysis of the eight first order factors. We obtained a trifactorial solution, in which we

	Current study			Tobin et al. ¹⁴			Example
	Items	Var.	Alpha	Items	Var.	Alpha	
Problem solving	5	9%	0.86	9	5%	0.82	I struggled to resolve the problem
Self-criticism	5	9%	0.89	9	12%	0.94	I blamed myself
Express emotion	5	8%	0.84	9	6%	0.89	I let out my feelings to reduce the stress
Wishful thinking	5	8%	0.78	9	4%	0.78	I wished that the situation had never started
Social support	5	8%	0.80	9	6%	0.89	I found somebody who was a good listener
Cognitive restructuring	5	7%	0.80	9	3%	0.83	I went over the problem again and again in my mind and finally saw things in a different light
Problem avoidance	5	6%	0.63	9	7%	0.72	I didn't let it get to me; I refused to think about it too much
Social withdrawal	5	5%	0.65	9	4%	0.81	I spent some time by myself
	40	60%		72	47%		

only clearly identified the factor of Emotion-focused management (Social support + Express emotion) while in the second, adaptive and disadaptive strategies were combined (Problem solving + Cognitive restructuring + Problem avoidance) and in the third strategies focused on the problem were combined with strategies focused on emotion (Social withdrawal + Self-criticism + Desiderative thinking).

We tested forcing 4 factors, confirming the Emotion-focused management, but complicating the interpretation of the rest: Problem avoidance appeared as an independent factor while Wishful thinking loaded in the rest of the factors and cognitive restructuring and social withdrawal in two of them.

Finally, we tried to directly force the structure of the third order obtained in the original study and also did not obtain the result expected. While the first one of the factors could be assimilated to adaptive coping, the coping strategies in the second one did not behave in the expected sense: social withdrawal did not saturate in any factor while the factor loading of Problem avoidance was negative.

Convergent validity of the CSI

Table 2 shows the intercorrelation matrix between the coping strategies. Each strategy was associated with between 4 to 6 of the other coping strategies, except Problem

Coping strategies	Coping strategies								Traits						
	SC	PS	CR	EE	SS	SD	SW	PA	N	E	O	A	C	CEP	
Self criticism	—														-0.21**
Problem solving	-0.13*	—							-0.39**	0.32**			0.44**	0.59**	
Cognitive restructuring		0.50**	—						-0.23**	0.24**			0.30**	0.41**	
Expression emotion	0.11*	0.08	0.14*	—						0.14*					
Social support	0.13*	0.18**	0.17**	0.57**	—					0.28**					
Wishful thinking	0.21**	-0.12*	-0.20**	0.20**	0.20**	—			0.25**	-0.14*	0.15*				-0.25**
Social withdrawal	0.23**			-0.19**	-0.20**	0.23**	—		0.22**	-0.16*					
Problem avoidance			0.32**				0.11*	—							

* p < 0.05. **p < 0.01. N: neuroticism; E: extraversion; O: openness; A: agreeableness; C: conscientiousness; CEP: coping perceived efficacy; SC: self-criticism; PS: problem solving; CR: cognitive restructuring; EE: expression emotion; SS: social support; DT: Wishful thinking; SW: social withdrawal. PA: problem avoidance.

avoidance, that did so only with two others. Nineteen of the 28 possible intercorrelations were significant. A 70% concordance occurred with the Tobin et al. study¹⁴, the two following most potent correlations standing out: Problem solving-Cognitive restructuring and Emotional expression-Social support.

On the contrary, we will focus on the discordant results. Two correlations that did not appear in the original study were produced, three of which, on the contrary, appeared in their study but not in ours; and finally, there were three correlations having contrary sign in their study regarding the present one. The correlations obtained by us and not by the authors of the questionnaire¹⁴ were Desiderative thinking-Social support and Desiderative thinking-Cognitive restructuring. The correlations obtained in the original study and not by us were Problem solving-Social withdrawal, Problem avoidance-Desiderative thinking and Self-criticism-Social support. The sign correlations that disagreed with the original study were Problem solving-Self-criticism, Emotional expression-Social withdrawal and Self-criticism-Social support.

The correlations between the use of coping strategies, personality traits and coping perceived efficacy are shown in table 2. According to the amount of associations, the most outstanding coping strategies were Problem solving, Cognitive restructuring and Desiderative thinking while the most outstanding traits were, in this order, Extraversion and Neuroticism. The use of half of the coping strategies was associated with their perceived efficacy. According to the intensity of the associations, the positive correlations Problem solving with responsibility and perceived efficacy, Cognitive restructuring with perceived efficacy, and the negative ones of neuroticism with problem solving and perceived efficacy stand out. In general, the sign of all the associations was that expected.

DISCUSSION

The essential objective of the work was to adapt the Coping Strategies Inventory to our setting, verifying its psychometric properties in a diverse sample of persons and stressful situations.

To begin with, we will state that the instrument has demonstrated a first order structure identical to that of the study (although not the second and third order ones), elevated internal consistency levels and sufficient convergent validity with all the measures used: personality dispositions, coping perceived efficacy and uses of other coping strategies.

In regards to the first hypothesis, we have obtained a first order factor structure that totally coincides with the original study. In fact, we have conserved the exact names.

The instrument has conserved two very useful practical properties: the same number of items per factor and the non-existence of negative loading in the items. Furthermore, after a detailed debugging, we have been able to reduce the number of items from 72 in the original study to 40 more representative ones, which adds another practical advantage, that of brevity. Furthermore, with all of this, we have achieved a significantly greater percentage of variance explained for all the factor structure that has a more homogeneous distribution of the explained variance for the factors.

However, we have not been able to verify the second and third order structures obtained by Tobin et al.¹⁴. In the second order only the Emotion-focused management coincided, while in the two others, a priori adaptive strategies (Problem solving and Cognitive restructuring) appeared mixed with a priori disadaptive strategies (Problem avoidance) and strategies focused on emotion (Self-criticism and Social Withdrawal) with strategies focused on the problem (Desiderative thinking). The third order structure was not at all feasible. It was only possible to obtain a factor such as management (Problem solving, Cognitive restructuring, Emotional expression and Social support) by forcing one of second order with two factors, but it was impossible to obtain the second since Social withdrawal did not load in Problem solving and Problem avoidance did so negatively.

The eight strategies obtained by the CSI (or assimilables) have been appearing in research consistently with different instruments such as the WOC or COPE and thus are confirmed as generic strategies of coping with stressful situations^{12,13}. Another more complex matter is to be able to group them into more general categories that permit the comparison between different studies and instruments. The results of our work do not support the idea that they can be grouped (at least between subjects) according to an efficacy criterion or even according to the classical criterion focused on the problem vs. focused on the emotion. Functioning of strategies seems to be more complex and it is not rare that factorizations of an upper order mask important differences between strategies¹¹. In view of all of this, we decided to adapt the CSI, using only the basic and specific strategies.

Regarding the second hypothesis, we verified some elevated levels of internal consistency, although in general, somewhat less than those of the original study, perhaps because of the lower number of items per factor. Even though our levels are in agreement with those obtained by other instruments^{15,16,20,21}, these results must be carefully interpreted in the specific scope of the assessment of coping strategies because it is feasible that the use of a single strategy may be effective for one person in a given situation and time and thus the scores on the rest of the strategies may be low or null¹¹². Thus, some lower levels of internal consistency should also not be of concern.

The third hypothesis referred to convergent validity of the instrument. On the one part, we assess the intercorrelations between the coping strategies because the research shows that the use of some strategies may be associated to that of others¹¹. In this sense, the expected associations were produced, similar to those obtained in the original study in 70% of the cases, and consistent with that obtained in other instruments^{20,21}. However, it is interesting to verify how the discrepancy between our study and that of Tobin et al.¹⁴ in regards to some associations does not alter the logic of the strategy functioning. For example, in the original study, self-criticism increased the likelihood of problem solving while in our case, this was not true. The two results are to be expected because both things may occur based on the person, situation and time in which these strategies take place,

In regards to the disposition, there is abundant literature on the relationship between the use of coping strategies and personality, including coping efficacy. In this sense, the associations were those expected, clearly observing two well-differentiated profiles: that of the emotionally stable, extraverted and responsible persons, who tend to solve the situation or change its means and perceive their coping as efficient and that of unstable and introverted persons who tend to withdraw socially and wish that the situation had never occurred and perceive their coping as not being very efficient. These results are consistent with those of several studies⁶⁻⁹. To illustrate this, we mention the work of Vollrath and Torgersen⁹ due to the similarity with our results. They also used the NEO. These authors obtained eight coping profiles. Two of them were almost identical to ours - one which they called insecurity, characterized by high levels of neuroticism and low ones of extraversion and another, that they called enterprising, characterized by high levels of extraversion and responsibility and low ones of neuroticism. The first profile was association with a greater use of dysfunctional coping strategies and lower use of strategies focused on the problem. On the contrary, the persons with the second profile used more strategies focused on the problem and fewer dysfunctional ones.

In conclusion, the adaptation of CSI has been satisfactory. Its good psychometric properties, briefness, ease of application and correction, versatility in the analysis of stressful situations, it being possible to detail or generalize will, and the possibility of combining qualitative and quantitative information, among other qualities, makes it worth while considering its use, not only in research but also in the clinical practice.

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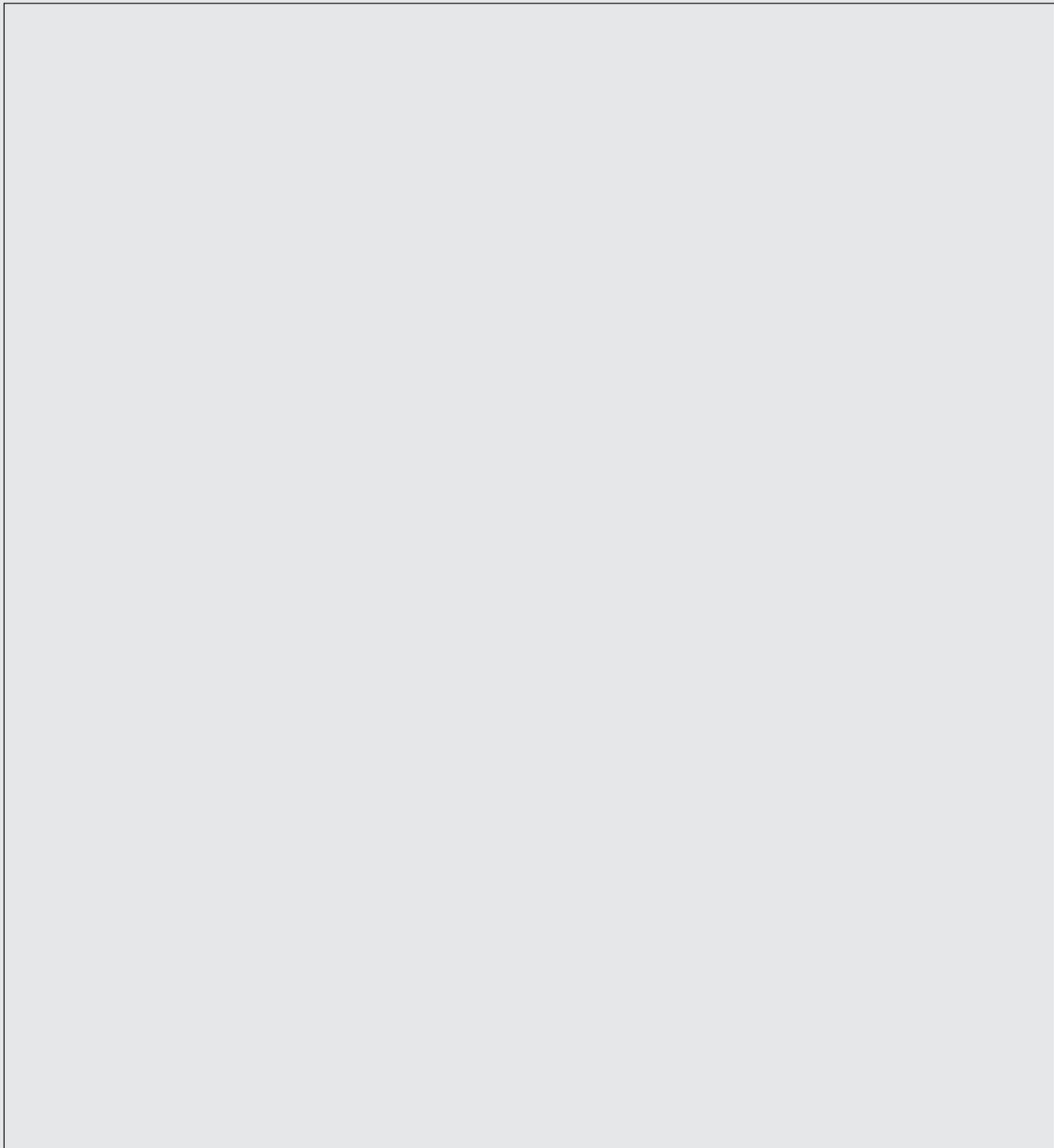
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Annex 1

Coping Strategies Inventory

(Tobin, Holroyd, Reynolds and Kigal, 1989. Adaptation by Cano, Rodríguez and García, 2006)

The purpose of this questionnaire is to find the type of situations that cause problems to people in their daily life and how they cope with these problems. Think about a fact or situation that has been very stressful for you in the last month for a few minutes. By stressful, we understand a situation that causes problems, that makes you feel bad or that is very difficult to cope with. It may be with the family, in school, at work, with friends, etc. Describe this situation in the blank space on this page. Write what occurred and include details such as place, who was involved, why you felt it was important who what you did. The situation may be occurring now or may have already occurred. Do not worry about how well it is written or if it is better or worsely organized, only write it as it occurred. Continue writing on the back if necessary.



Annex 1

Coping Strategies Inventory
(Tobin, Holroyd, Reynolds and Kigal, 1989. Adaptation by Cano, Rodríguez and García, 2006)

Once again, take a few minutes to think about the situation or fact that you have chosen. Answer the following list of statements based on how you managed this situation. Read each sentence and determine the degree in which you did which each sentence indicates in the situation that you chose before, marking the number that corresponds:

0: not at all; 1: a little; 2: a lot; 3: very much; 4: completely

Be sure to answer all the sentences and that you only check one number in each one of them. There are no correct or incorrect answers, they only evaluate what you did, thought or felt at that time.

Coping Strategies Inventory

1. I struggled to resolve the problem	0	1	2	3	4
2. I blamed myself	0	1	2	3	4
3. I let out my feelings to reduce the stress	0	1	2	3	4
4. I wished that the situation had never started	0	1	2	3	4
5. I found somebody who was a good listener	0	1	2	3	4
6. I went over the problem again and again in my mind and finally saw things in a different light	0	1	2	3	4
7. I didn't let it get to me; I refused to think about it too much	0	1	2	3	4
8. I spent some time by myself	0	1	2	3	4
9. I worked on solving the problems in the situation	0	1	2	3	4
10. I realized that I was personally responsible for my difficulties and really lectured myself	0	1	2	3	4
11. I let my emotions go	0	1	2	3	4
12. I wished that the situation could go away or somehow be over with	0	1	2	3	4
13. I talked to someone that I was very close to	0	1	2	3	4
14. I reorganized the way I looked at the situation, so things didn't look so bad	0	1	2	3	4
15. I tried to forget the whole thing	0	1	2	3	4
16. I avoided being with people	0	1	2	3	4
17. I tackled the problem head-on	0	1	2	3	4
18. I criticized myself for what happened	0	1	2	3	4
19. I got in touch with my feelings and just let them go	0	1	2	3	4
20. I wished that I never let myself get involved with that situation	0	1	2	3	4
21. I let my friends help out	0	1	2	3	4
22. I convinced myself that things aren't quite as bad as they seem	0	1	2	3	4
23. I made light of the situation and refused to get too serious about it	0	1	2	3	4
24. I kept my thoughts and feelings to myself	0	1	2	3	4
25. I knew what had to be done, so I doubled my efforts and tried harder to make things work	0	1	2	3	4
26. I kicked myself for letting this happen	0	1	2	3	4
27. I let my emotions out	0	1	2	3	4
28. I wished I could have changed what happened	0	1	2	3	4
29. I spent some time with my friends	0	1	2	3	4
30. I asked myself what was really important, and discovered that things weren't so bad after all	0	1	2	3	4
31. I went along as if nothing were happening	0	1	2	3	4
32. I did not let others know how I was feeling	0	1	2	3	4
33. I stood my ground and fought for what I wanted	0	1	2	3	4
34. It was my mistake and I needed to suffer the consequences	0	1	2	3	4
35. My feelings were overwhelming and they just exploded	0	1	2	3	4
36. I had fantasies or wishes about how things might turn out	0	1	2	3	4
37. I asked a friend or relative I respect for advice	0	1	2	3	4
38. I looked for the silver lining, so to speak; tried to look on the bright side of things	0	1	2	3	4
39. I avoided thinking or doing anything about the situation	0	1	2	3	4
40. I tried to keep my feelings to myself	0	1	2	3	4
I consider that I can cope with the situation	0	1	2	3	4

END OF TEST

Annex 1		Coping Strategies Inventory (Tobin, Holroyd, Reynolds and Kigal, 1989. Adaptation by Cano, Rodríguez and García, 2006)							
Coping Strategy Inventory (correction keys)									
Problem solving (PS)	01 + 09 + 17 + 25 + 33								
Self-criticism (AC)	02 + 10 + 18 + 26 + 34								
Expression emotion (EE)	03 + 11 + 19 + 27 + 35								
Wishful thinking (DT)	04 + 12 + 20 + 28 + 36								
Social support (SS)	05 + 13 + 21 + 29 + 37								
Cognitive restructuring (CR)	06 + 14 + 22 + 30 + 38								
Problem avoidance (PA)	07 + 15 + 23 + 31 + 39								
Social withdrawal (SW)	08 + 16 + 24 + 32 + 40								
Coping Strategy Inventory (scale)									
PC	PS	AC	EE	DT	SS	CR	PA	SW	PC
1	1								1
2	2			0	0	0			2
3	3			1	1	1			3
4	4		0	1	2	2			4
5	5		1	2	3	2	0		5
10	6		3	4	4	4	1		10
15	8		4	5	5	5	2	0	15
20	10		4	6	6	6	2	1	20
25	11		5	7	7	6	3	1	25
30	12	0	5	8	8	7	3	2	30
35	13	1	6	9	8	8	4	2	35
40	14	2	7	10	9	9	4	2	40
45	15	3	8	12	10	9	5	3	45
50	16	3	9	12	11	10	5	3	50
55	16	4	9	13	12	11	6	4	55
60	16	5	10	14	13	12	7	4	60
65	17	6	11	15	13	12	7	5	65
70	18	7	11	16	14	13	8	5	70
75	19	8	12	16	15	14	8	6	75
80	19	10	14	17	16	15	9	7	80
85	20	12	15	18	17	16	10	8	85
90	20	14	16	19	18	17	11	9	90
95	20	16	18	20	19	18	13	11	95
96	20	17	18	20	20	19	13	11	96
97	20	18	19	20	20	19	14	11	97
98	20	20	20	20	20	19.28	16	13	98
99	20	20	20	20	20	20	16	15	99
Mean	14.25	5.11	8.98	11.66	10.93	10.17	5.81	3.93	Mean
SD	5.01	5.05	5.05	5.05	5.12	4.94	3.89	3.53	SD
N	335	335	335	334	332	335	334	334	N
SC: self-criticism; PS: problem solving; CR: cognitive restructuring; EE: expression emotion; SS: social support; DT: desiderative thinking; SW: social withdrawal; PA: problem avoidance.									